EDWARD LAWRENCE KEYES

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EN stamp their personality upon their time in one of two ways. Some leave the impress of their adventurous and romantic characteristics: they are the discoverers, the inventors, the poets. Far more numerous are those who impress their contemporaries with the very essence of their character, their industry, their intelligence, their honesty rather than by a definite invention or discovery: such are the statesmen, the educators, the scientists. The happy combination of the two is rare, yet it was found in Edward L. Keyes, A.M., M.D., LL.D., K.S.G.

Dr. Keyes was born August 28, 1843, at Fort Moultrie in Charleston Harbor, South Carolina, of Erasmus Darwin Keyes, who later commanded the Union troops at the battle of Fair Oaks and was ultimately Major-General of Volunteers, U. S. A., and Caroline M. Clarke of Brooklyn, New York. His forbears were Puritan; his education was received at Dedham, Massachusetts, and at Yale (A.B., 1863), where he rowed on the Freshman crew and was a member of the Scroll and Key Society.

After a brief staff captaincy under his father at Washington during the closing months of the Civil War, young Keyes entered New York University Medical College, graduating in the customary 2 years in the spring of 1866. Under the advice of his preceptor, the professor of surgery, William H. Van Buren, he then immediately proceeded to Paris to specialize in dermatology. After a year in Paris he returned to New York where he offered himself to Dr. Van Buren as an assistant, only to be informed that Doctors Swift and Gouley already filled all the available space but that he, Keyes, could do odd jobs if he wished. His acceptance of this humble prospect and his industry thereupon were rewarded when shortly the dispute about the invention of the tunneled urethral sound dissolved the association between Van Buren and Gouley, while Swift died, leaving Keyes as first assistant of the town's brilliant and fashionable surgeon.

Curiously enough, in view of his later surgical developments, Keyes' special qualifications as a dermatologist seem to have sidetracked him from that career as general surgeon to which the assistant of the professor at the University and the visiting surgeon to the New York Hospital might well have aspired. We find him holding the first clinic in dermatology in the United States at the

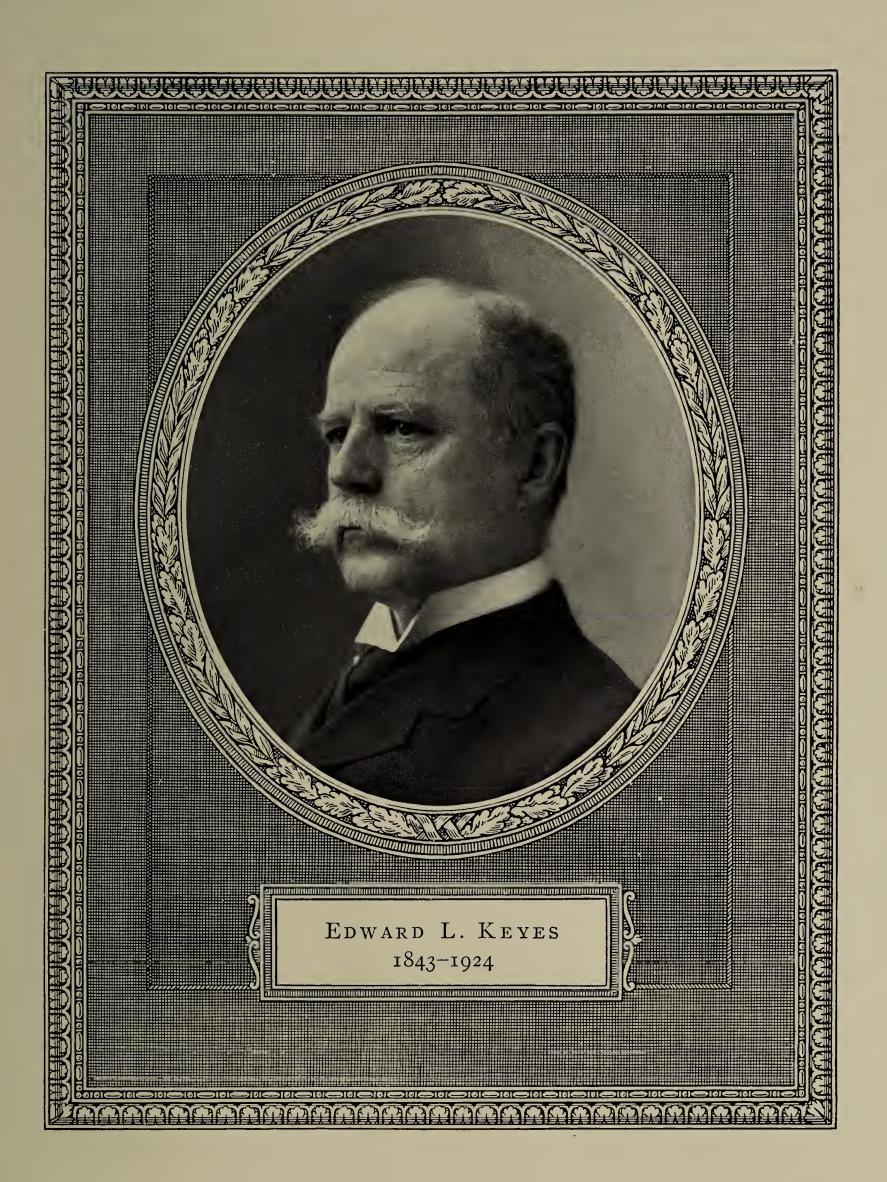
Woman's Medical College in New York in 1870. The next year he was professor of dermatology at Bellevue Hospital Medical College to which he joined the specialties of syphilology and genito-urinary surgery, thus beginning his surgical career as a specialist, with a hospital appointment first at the Charity (now City) Hospital and later at Bellevue Hospital where he established the first ward in the country devoted exclusively to genito-urinary diseases.

He continued to teach until 1892. His sound logic, his gifts of expression, his sympathetic personality and his keen sense of dramatic values made him a most effective clinical lecturer. What old student of his will forget the first words of his opening lecture? The Professor enters briskly, greets his students in a few words as a patient is being wheeled in on a stretcher; then he turns to the patient, whips the sheet off the ulcerated nakedness: "Gentlemen, this is syphilis!"

We find him in his youth combating the errors of the day, proving by experiment that clean urine injected into the peritoneum does not infect, that urethral chill does not follow the passage of a sound unless this enters the deep urethra, warring with Otis on the latter's theory as to strictures of large calibre, attacking successfully the electrolytic treatment of urethral stricture, and spreading the whole of his scientific knowledge upon the pages of that classical textbook on genito-urinary diseases and syphilis by Van Buren and Keyes of which the first edition appeared in 1874 and which has been a standard textbook of urology from that day.

Doubtless his greatest contribution to scientific medicine was his paper on the clinical effects of small doses of mercury, read before the International Congress of Medicine in Philadelphia in the year 1876. At this time, current practice regarded syphilis as an evil only one degree worse than mercury. The treatment of the disease consequently consisted chiefly in the administration of iodides and various "potent herbs" of which the magic formulæ persist to this day, while here and there an adherent of mercurialization subjected his patients, when their disease became unbearable, to inunctions which were continued until the patient had spat out such teeth as he was willing to lose.

As Keyes used to tell the story, it was the insistence of Dr. Piffard before the New York Pathological Society that mercury was totally evil which first set him thinking it might be good. Piffard drove his logic too hard and Keyes went back to his home in Eighth Street wondering whether it was quite as bad as all that. A new hæmocytometer was ordered from Paris; Keyes and his friend, Stimson, proceeded to dose themselves with mercury and check the results with blood counts; syphilitic and non-syphilitic patients at the hospital were submitted to a like investigation and it was shortly proved that mercury in small doses is a tonic. Upon this thesis was founded the method of internal administration of the drug advised by Keyes and generally adopted in this country during the last 20 years of the nineteenth century.





In his latter years, though he continued always to consider himself a general practitioner (and was once jeered at by his fellows for missing a meeting of the American Association of Genito-Urinary Surgeons because of an obstetrical case) his originality manifested itself more in the daily spoken word and in the activities of his pupils, Alexander, Fuller, Chetwood, and Keyes, Jr. The most notable contributions of these men were probably those of Fuller in originating the treatment and especially the surgery of the seminal vesicle (and incidentally the first crude theory of the metastatic origin of arthritis) and in the establishment of suprapubic prostatectomy upon its modern basis. Of these items, the ones relating to the seminal vesicle and rheumatism seem to have belonged wholly to Fuller, but the details of prostatectomy as described by Fuller were those of the operation performed by both.

So much for the inventor. The man was bigger. Though no organizer, his authorship of an accepted textbook, his pellucid honesty, his gift of precise speech, his kindliness to all, made him inevitably the founder and first president of the American Association of Genito-Urinary Surgeons. Later his gifts in oratory won him the central oration at the opening of the New York Academy of Medicine in Forty-Third Street. He served a term as Vice-President of the Academy. In the privacy of his office he was the true helper of the sick, interested far less in organization progress or individual invention than in solving the puzzle presented by each patient in his turn. Here the simple nobility of his character and his understanding sympathy gave him that hold upon his generation which is the physician's great reward. In his youth he had been isolated a month with Charles O'Connor when the latter returned from Europe with smallpox, and years after when the man who smashed the Tweed ring was dying at Nantucket and was told that the family had sent for Keyes, he said, "Don't let him come; this time I want to die."

He, himself, succumbed to the "old man's friend," pneumonia, at the age of eighty, on January 24, 1924.

